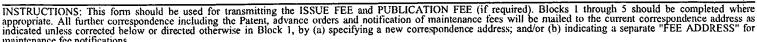
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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(Depositor's name)				
(Signature)				Ÿ
(Date)				

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/830,959	07/30/2001	Marc De Salivet De Fouchecour	3102PCT/US	5296

TITLE OF INVENTION: WATCH WITH RELATIVE READING

APPLN, TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	-NO-YES	¥ .08812	165 \$0	-\$1330 ~ \$ 66	5 10/14/2004
EXAM	INER	ART UNIT	CLASS-SUBCLASS]	
GOODWIN,	JEANNE M	2841	368-077000	_	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		on form (1) the registration of a Customer (2) the registration of a Customer (2) registration (3) the registration of a Customer (4) the responsibility of a C	r printing on the patent front page, I are names of up to 3 registered pate ents OR, alternatively, e name of a single firm (having as ered attorney or agent) and the nar istered patent attorneys or agents. It, no name will be printed.	a member a 2	& THOMPSON

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not 4a. The following fee(s) are enclosed:	be printed on the patent); individual corporation or other private group entity government db. Payment of Fee(s):
☐ Issue Fee ☐ Issue Fee	A check in the amount of the fee(s) is enclosed.
☐ Publication Fee (No small entity discount permitted)	☐ Payment by credit card. Form PTO-2038 is attached.
☐ Advance Order - # of Copies	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 25-0120 (enclose an extra copy of this form).
5. Change in Entity Status (from status indicated above)	(II necessary)
🖸 a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

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(Authorized Signature)	Benoît Castel
Demest CACTET	125 0/1

September 28, 2004

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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